

APPLICATION FOR INDIVIDUAL MOBILIZATION AUGMENTATION PROGRAM ASSIGNMENT

For use of this form, see AR 140-145; the proponent agency is ODCSPER.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: 10 USC Section 3012, 10 USC 275, 10 USC 270

PRINCIPAL PURPOSE: To provide full background information on an individual applying for an Individual Mobilization Augmentation Program position.

ROUTINE USES: To determine if an individual meets requirements for assignment to a Mobilization Augmentation position; to determine the best qualified for the position; and to update military personnel records. The SSN is used to identify the individual.

DISCLOSURE Disclosure of SSN and other personal information is voluntary. However, failure to provide the requested information may result in non-selection for a Mobilization Augmentation assignment.

PART I

(To be completed by applicant)

1. THRU (Unit personnel)		2. TO: COMMANDER, USARCPAC 9700 PAGE BOULEVARD ATTN: AGUZ-OPM-CM ST. LOUIS, MO 63132		3. DATE	
4. FROM (Last name, first, MI)		5. SOCIAL SECURITY NO.		6. GRADE	
				7. BRANCH	
8. DATE OF BIRTH		9. PLACE OF BIRTH (City, State, Country)		10. PRESENT ASSIGNMENT	
11. PRIMARY MOS OR SSI (Number and title)		12. ADDITIONAL SPECIALTIES IN WHICH QUALIFIED			
13. HOME ADDRESS (Include ZIP Code)		14. BUSINESS ADDRESS (Include name of firm, mailing address and ZIP Code)			
15. HOME TELEPHONE NO. (Include area code)		16. BUSINESS TELEPHONE NO. (Include area code)			
17. CIVILIAN OCCUPATION (Include title, duties, level of responsibility, and grade if Civil Service)					
18. ASSIGNMENT PREFERENCE (List command, geographical area or type of position in order of preference. If no preference, place check mark in box)					
<input type="checkbox"/> ANY POSITION FOR WHICH QUALIFIED					
19. MILITARY EDUCATION (List school, courses, dates. Include extension courses)					
20. MILITARY SERVICE (Briefly list chronologically the last 5 years of reserve and active duty assignments and promotions)					

21. CIVILIAN EDUCATION (Years completed and for college level list major and degree if any)

22. OTHER BUSINESS OR PROFESSIONAL EXPERIENCE

23. FOREIGN LANGUAGES

a. SPEAK

b. READ

c. WRITE

24. REMARKS (Include any significant aspects of civilian or military career)

25. I UNDERSTAND AND HEREBY AGREE THAT AS A MEMBER OF THE INDIVIDUAL MOBILIZATION AUGMENTATION PROGRAM, I WILL BE A MEMBER OF THE SELECTED RESERVE. I FURTHER UNDERSTAND AND AGREE THAT I WILL BE AVAILABLE FOR MOBILIZATION M + 31 DAYS OR EARLIER AS PROVIDED UNDER 10 USC 672(e). EXACT REPORT DATE WILL BE DETERMINED BY AGENCY TO WHICH ASSIGNED.

a. TYPED OR PRINTED NAME OF APPLICANT (First, MI, last)

b. SIGNATURE

PART II

(to be completed by supervisor of Federal or DA civilian employee)

26. APPLICANT IS ☐ FEDERAL EMPLOYEE ☐ DA CIVILIAN EMPLOYEE AND ☐ IS ☐ IS NOT CONSIDERED A KEY FEDERAL EMPLOYEE IN ACCORDANCE WITH SECTION III, CHAPTER 1, AR 135-133.

27. COMMAND OR AGENCY ADDRESS (Include ZIP Code)

28. SIGNATURE

PART III

(to be completed by Custodian of MPRJ)

29. PROMOTION ELIGIBILITY DATE

30. MANDATORY REMOVAL DATE

31. RETIREMENT YEAR END
DATE

32. RETIREMENT POINTS EARNED IN LAST RETIREMENT
YEAR

33. SECURITY CLEARANCE

34. TYPES AND DATES OF SECURITY INVESTIGATIONS AND AGENCIES CONDUCTING INVESTIGATIONS.

35. SCREENING ACTION
PENDING

☐ YES ☐ NO

36. RECOMMEND APPROVAL

☐ YES ☐ NO

37. SIGNATURE (MPRJ Custodian)

38. DATE